RI Department of Health
Office of Communicable Diseases
Template

NEDSS Documentation
Version 2/ October 1, 2008
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Lab Report – RI Definitions & Rules for Entering Laboratory Fields for Pertussis

Note: **RED = Required**, **BLUE = Required Conditionally,** BLACK = Not Required,

Field on Screen	Description	RI Rules for Data Entry
Order Information		
Reporting Facility	**Enter the name of lab PERFORMING the Test. To include reference laboratories.**	**Required**
Ordering Facility	The lab that PROCESSED the lab specimen. It could be the same as the Reporting Facility. (NOTE: The lab does not order the test.)	Not required
Ordering Provider	**Name of the health care provider ordering the lab test.**	**Required, if known**
Program Area	**Program Area associated with the condition. The program areas are: 1) General Communicable Diseases, 2) Hepatitis, 3)HIV/AIDS, 4) STD and 5)VPD (Vaccine Preventable Diseases)**	**Required**
Jurisdiction	**The geographic area responsible for managing public health activities including intervention, prevention and surveillance. There is only 1 jurisdiction for RI**	**Required**
Share record with Guests for this Program Area and Jurisdiction	This field indicates whether or not the record should be shared with all users who have guest privileges for the Program Area/Jurisdiction.	Not Required
Lab Report Date	**Date of Report as listed on lab report. This may be the date the report was generated or the date the tests were finalized.**	**Required**
Date Received by Public Health	**Date Received by Public Health either by fax, stamped date on mail form or date of call to HEALTH.** **Over-ride pre-populated date with date received by public health.**	**Required**
Ordered Test	The ordered test name	Not Required
Accession Number	A laboratory generated number that identifies the specimen related to this test.	Not Required
Specimen Source	**This is the medium from which the specimen originated. Examples include whole blood, saliva, urine, etc.**	**Required**
Specimen Site	This indicates the physical location, of the subject, where the specimen originated. Examples include: Right Internal Jugular, Left Arm, Buttock, Right Eye, etc	Not Required

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Field on Screen	Description	RI Rules for Data Entry
Date Specimen Collected	**Date the specimen was collected.**	**Required. Also use for Lab Report Date**
Patient Status at Specimen Collection	Patient condition at the time that the specimen was taken	Not Required
Test Result(s)		
Resulted Test	**Test that was performed. Please use "Bordetella pertussis Result".**	**Required**
Coded Result	**The coded result value for a test, i.e. "Positive".**	**Required if known**
Numeric Result	The numeric value for a lab report. The user can enter the number or the number plus comparative operators (<, <=, >, >=) and separators and the system will parse the data in the proper fields in the database.	Not Required
Text Result	**The Lab Result Text format field allows user to enter a textual result values (i.e., values not included in the coded drop down).** **Please use:** • **For PCR: "PCR positive (or negative) for Bordetella pertussis"** • **For culture: "Culture positive (or negative) for Bordetella pertussis"**	**Required**
Reference Range	The reference range allows the user to enter the values of the expected range of results for the test.	Not Required
Result Status	**The Result Status is the degree of completion of the lab test.**	**Required**
Result Comments	Free text area for comments having to do specifically with the lab result test.	Not Required
Administrative		
Comments	User has option to enter free text comments about a lab report	Enter if needed.